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PATENT  
Attorney Docket No. A-68990-3/463077-9/RFT/RMS/RMK

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of

DAHIYAT, *et al.*

Serial No. 09/981,289

Filed: October 15, 2001

For: *Design and Discovery of Protein  
Based TNF- $\alpha$  Variants for the  
Treatment of TNF- $\alpha$  Related  
Disorders*

Group No. 1647

Examiner: J. Seharaseyon

CERTIFICATE OF MAILING

I hereby certify that this correspondence, including listed enclosures, are being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on:

Date: April 5, 2005

Signature

*Luke Szymanski*

TRANSMITTAL

Mail Stop AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith are the following for the above-identified application:

1. Amendment and Response to Office Action;
2. Petition for 3 Month Extension of Time up to and including April 5, 2005;
3. Fee Transmittal;
4. Return receipt postcard.

This paper is being submitted in response to the Office Action mailed October 5, 2004.

The response is filed on or before April 5, 2005, with a Petition for a three month extension of time and a fee transmittal authorizing the commissioner to hereby charge the extension fee in the amount of \$1,020.00 is enclosed.

The Commissioner is authorized to charge any additional fees, such as extension fees or other relief, that may be required, or credit any overpayment to Deposit Account No. 50-2319 (Our Order No. A-68990-3/(463077-9)/RMS/RMK).

Please direct further questions in connection with this Application to the undersigned at (415) 781-1989.

Dated: 4/5/05  
Four Embarcadero Center  
Suite 3400  
San Francisco, CA 94111-4187  
Telephone: (415) 781-1989  
Fax No. (415) 398-3249

Respectfully submitted,

DORSEY & WHITNEY LLP

By: 

Todd A. Lorenz, Reg. No. 39,754  
/for/Robin M. Silva, Reg. No. 38,304  
Filed under 37 C.F.R. § 1.34(a)

**Customer No. 32940**



Effective on 12/08/2004

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEE TRANSMITTAL  
(FOR FY 2005)****Complete if Known**

Application No.	09/981,289
Filing Date	October 15, 2001
First Named Inventor	Dahiyat, Bassil I.
Group Art Unit	1647
Examiner	J. Seharaseyon
Attorney Docket No.	A-68990-3/RMS/RMK (463077-00009)

☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$)**450.00****METHOD OF PAYMENT** (check all that apply)☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_☒ Deposit Account Deposit Account No. **50-2319** Deposit Account Name: **DORSEY & WHITNEY LLP**

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

- ☒ Charge the fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee  
☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	\$
Design	200	100	100	50	130	65	\$
Plant	200	100	300	150	160	80	\$
Reissue	300	150	500	250	600	300	\$
Provisional	200	100	0	0	0	0	\$

**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent.	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims
-20 or HP=	0	x 50	= \$ 0	Fee (\$)
				Fee Paid (\$)

HP=highest number of total claims paid for, if greater than 20

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
-3 or HP=	0	x 200	= \$ 0

HP=highest number of independent claims paid for, if greater than 3

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
47 - 100 =	0 / 50 =	0 (round up to a whole number) x	\$ 250	\$ 0

**4. OTHER FEE(S)**

	Fee Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)	\$ 0
Other: Petition for 3 Month Extension of Time to and including April 5, 2005	\$ 1,020.00

**Submitted by:**

Name:	Todd A. Lorenz /for/ Robin M. Silva	Reg. No.:	39,754 38,304	Telephone:	(415) 781-1989
Signature:		Date:	April 5, 2005		

(Client Matter No. 463077-00009)

(1164662)